Ownership:
Highest Level License:
Operate in Conjunction with CBRF?
Title 18 (Medicare) Certified? Nonprofit Church-Related Skilled No 25 25 25 \*\*\*\* Yes No Average Daily Census: 23

Services Provided to Non-Residents	Age, Sex, and Primary Diagn	Length of Stay (12/31/00)	%				
Home Health Care Supp. Home Care-Personal Care	No Yes	Primary Diagnosis	 %	Age Groups		Less Than 1 Year 1 - 4 Years	48. 0 44. 0
Supp. Home Care-Household Services	Yes	Developmental Disabilities	4.0	Under 65	0. 0	More Than 4 Years	8. 0
Day Servi ces	No	Mental Illness (Org./Psy)	<b>68.</b> 0	65 - 74	8. 0		
Respite Care	Yes	Mental Illness (Other)	4. 0	75 - 84	12. 0		100.0
Adult Day Care	No	Alcohol & Other Drug Abuse	0. 0	85 - 94	<b>56</b> . <b>0</b>	****************	*******
Adult Day Health Care	No	Para-, Quadra-, Hemi plegi c	4. 0	95 & 0ver	24. 0	Full-Time Equivaler	ıt
Congregate Meals	No	Cancer	0. 0			Nursing Staff per 100 Re	esi dents
Home Delivered Meals	No	Fractures	0. 0		100. 0	(12/31/00)	
Other Meals	No	Cardi ovascul ar	0. 0	65 & 0ver	100. 0	[	
Transportation	Yes	Cerebrovascul ar	8. 0			RNs	25. 2
Referral Service	No	Di abetes	4. 0	Sex	%	LPNs	0.0
Other Services	No	Respi ratory	0. 0			Nursing Assistants	
Provi de Day Programming for		Other Medical Conditions	8. 0	Male	12. 0	Aides & Orderlies	39. 8
Mentally Ill	No			Female	88. 0		
Provi de Day Programming for			100. 0				
Developmentally Disabled	No				100. 0		
***********************	****	·*****************************	*****	k*************	:*******	k***********************	******

## Method of Reimbursement

	Medicare (Title 18)				Medicaid (Title 19)			Other Pri			Private Pay			Manageo	l Care		Percent
	Per Diem			m	Per Diem		m	n Per Diem		n	Per Diem			Per Diem Total			Of All
Level of Care	No.	%	Rate	No.	%	Rate	No.	%	Rate	No	. %	Rate	No.	%	Rate	No.	Resi dents
Int. Skilled Care	0	0. 0	\$0.00	0 0	. 0	\$0.00	0	0. 0	\$0.00	0	0. 0	\$0.00	0	0. 0	\$0.00	0	0. 0%
Skilled Care	0	0.0	\$0.00	18 100	. 0 \$	3116. 78	0	0.0	\$0.00	7	100.0	\$133.65	0	0.0	\$0.00	25	100.0%
Intermediate				0 0	. 0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Limited Care				0 0	. 0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Personal Care				0 0	. 0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Residential Care				0 0	. 0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Dev. Di sabl ed				0 0	. 0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Traumatic Brain In	. 0	0.0	<b>\$0. 00</b>	0 0	. 0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Venti l ator- Depende	nt 0	0.0	<b>\$0. 00</b>	0 0	. 0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Total	0	0.0		18 100	. 0		0	0.0		7	100.0		0	0.0		25	100.0%

\*

Admissions, Discharges, and Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/00 Deaths During Reporting Period % Needing Total Assistance of Percent Admissions from: Activities of % Totally Number of Private Home/No Home Health 0.0 Daily Living (ADL) Independent One Or Two Staff Dependent Resi dents Private Home/With Home Health 0.0 Baťhi ng 0.0 **52.** 0 48. 0 25 Other Nursing Homes 5. 9 Dressi ng 0.0 48.0 **52.** 0 25 Acute Care Hospitals
Psych. Hosp. - MR/DD Facilities
Rehabilitation Hospitals Transferri ng 25 25 **58.8** 16.0 64. 0 20. 0 32.0 0.0 Toilet Use 4.0 64.0 25 0.0 Eating 16.0 **68.** 0 16.0 Other Locations 35.3 Total Number of Admissions Continence Special Treatments 17 Percent Discharges To: Indwelling Or External Catheter Receiving Respiratory Care 0.0 0.0 Receiving Tracheostomy Care Private Home/No Home Health 6.3 Occ/Freq. Incontinent of Bladder 28.0 0.0 Receiving Suctioning Receiving Ostomy Care Private Home/With Home Health Occ/Freq. Incontinent of Bowel 12.0 0.0 12. 5 Other Nursing Homes 0.0 4.0 Acute Care Hospitals
Psych. Hosp. - MR/DD Facilities
Rehabilitation Hospitals Receiving Tube Feeding Receiving Mechanically Altered Diets 6.3 0.0 Mobility Physically Restrained 12.0 0.020.0 0.0 Other Locations 12.5 Skin Care Other Resident Characteristics Deaths 62. 5 With Pressure Sores 4.0 Have Advance Directives 100.0 Total Number of Discharges With Rashes 0.0 Medi cati ons Receiving Psychoactive Drugs **76.** 0 (Including Deaths)

Selected Statistics: This Facility Compared to All Similar Rural Area Facilities & Compared to All Facilities

		Ownershi p:			Si ze:	Li censure:			
	Thi s	Nonj	orofi t	Und	er 50	Skilled		Al l	
	Facility	Peer Group		Peer Group		Peer Group		Facilities	
	%	%	Ratio	%	Ratio	%	Ratio	%	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	92. 0	88. 0	1.05	87. 1	1. 06	84. 1	1.09	84. 5	1.09
Current Residents from In-County	100	79. 3	1. 26	73. 7	1. 36	76. 2	1. 31	77. 5	1. 29
Admissions from In-County, Still Residing	70. 6	24. 2	2. 91	39. 5	1. 79	22. 2	3. 18	21. 5	3. 28
Admi ssi ons/Average Daily Census	73. 9	102. 4	0. 72	77. 9	0. 95	112. 3	0. 66	124. 3	0. 59
Discharges/Average Daily Census	69. 6	99. 2	0. 70	73.8	0. 94	112.8	0. 62	126. 1	0. 55
Discharges To Private Residence/Average Daily Census	13. 0	33. 8	0. 39	18. 5	0. 71	44. 1	0. 30	49. 9	0. 26
Residents Receiving Skilled Care	100	88. 7	1. 13	<b>78</b> . 5	1. 27	89. 6	1. 12	83. 3	1. 20
Residents Aged 65 and Older	100	96. 0	1.04	96. 1	1.04	94. 3	1.06	87. 7	1. 14
Title 19 (Medicaid) Funded Residents	72. 0	<b>68</b> . <b>6</b>	1. 05	79. 5	0. 91	70. 1	1.03	69. 0	1.04
Private Pay Funded Residents	28. 0	26. 2	1. 07	19. 0	1.47	21.4	1. 31	22. 6	1. 24
Developmentally Disabled Residents	4. 0	0. 6	6. 42	1. 5	2.73	0. 9	4. 36	7. 6	0. 52
Mentally Ill Résidents	72. 0	38. 6	1.86	60. 0	1. 20	39. 6	1.82	33. 3	2. 16
General Medical Service Residents	8. 0	16. 4	0.49	10. 2	0. 78	17. 0	0.47	18. 4	0.43
Impaired ADL (Mean)	64. 0	46. 9	1. 36	49. 5	1. 29	48. 2	1. 33	49. 4	1.30
Psychol ogi cal Problems	<b>76.</b> 0	<b>53. 4</b>	1. 42	63. 4	1. 20	50.8	1. 50	50. 1	1. 52
Nursing Care Required (Mean)	3. 5	6. 5	0. 54	5. 7	0.61	6. 7	0. 52	7. 2	0.49